10/6/9/055 PTO/SB/06 (08-03

Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application or Docket Number** PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) NUMBER EXTRA RATE FEE NUMBER FILED **RATE** FEE FOR BASIC FEE OR (37 CFR 1.16(a)) TOTAL CLAIMS minus 20 =X \$ OR (37 CFR 1.16(c)) INDEPENDENT CLAIMS OR minus 3 =(37 CFR 1.16(b)) (37 CFR 1.16(d)) OR MULTIPLE DEPENDENT CLAIM PRESENT **TOTAL** OR **TOTAL** * If the difference in column 1 is less than zero, enter "0" in column 2. CHAIMS AS AMENDED - PART II OTHER THAN OR (Column 3) SMALL ENTITY (Column 2) SMALL ENTITY Column 1) HIGHEST **CLAIMS** PRESENT RATE ADDI-RATE ADDI-REMAINING NUMBER **EXTRA** TIONAL TIONAL **PREVIOUSLY AFTER** ENDMENT FEE FEE **AMENDMENT** PAID FOR Minus Total OR X \$ X \$ (37 CFR 1.16(c)) = Independent Minus (37 CFR 1.16(b)) X \$ OR AM FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 3) (Column 1) (Column 2) HIGHEST **CLAIMS** $\mathbf{\omega}$ **PRESENT** RATE ADDI-**RATE** ADDI-NUMBER REMAINING EXTRA TIONAL TIONAL **PREVIOUSLY AFTER** EN FE**E** FEE PAID FOR **AMENDMENT** Minus Total ENDM OR X \$ (37 CFR 1,16(c)) = Independent Minus X \$ = = (37 CFR 1.16(b)) X \$ OR AM FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL IOIAL OR ADD'L FEE ADD'L FEE (Column 3) (Column 1) (Column 2) **HIGHEST CLAIMS** ADDI-ADDI-RATE PRESENT **RATE** NUMBER REMAINING **TIONAL EXTRA** TIONAL **PREVIOUSLY AMENDMENT AFTER** FEE FEE PAID FOR **AMENDMENT** = Minus Total OR X \$ (37 CFR 1.16(c)) Independent Minus X \$_ (37 CFR 1.16(b)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL ADD'L FEE ADD'L FEE OR * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

